

Office Use Only		Applicant Information (Blue or Black Ink Only)		Building Department	
Submittal Date: _____ Permit #: _____		Parcel / Folio Number: _____		1700 Convention Center Drive, 2 <sup>nd</sup> Floor Miami Beach, Florida 33139 Telephone: 305- 673-7610; Fax: 305-673-7857 <a href="http://www.miamibeachfl.gov/building/">http://www.miamibeachfl.gov/building/</a>	
Property Address: _____		Unit #: _____	Master Permit Number (If applicable): _____	Violation # (If applicable): _____	
Permit Type (select one)		Permit Request (select all that apply)		Property Information (select one)	
<input type="checkbox"/> Building <input type="checkbox"/> Electrical <input type="checkbox"/> Mechanical <input type="checkbox"/> Plumbing <input type="checkbox"/> Roofing <input type="checkbox"/> Phased Permit <input type="checkbox"/> Demo year built _____ <input type="checkbox"/> Generator <input type="checkbox"/> Temporary Structure <input type="checkbox"/> Fire <input type="checkbox"/> Shop Drawings		<input type="checkbox"/> New Permit <input type="checkbox"/> Change of Contractor <input type="checkbox"/> Change of Architect/Engineer <input type="checkbox"/> LEED <input type="checkbox"/> Permit Extension <input type="checkbox"/> Permit Renewal <input type="checkbox"/> Permit Revision <input type="checkbox"/> Change of Use <input type="checkbox"/> Private Provider <input type="checkbox"/> City Project <input type="checkbox"/> Reprieve Permit		<input type="checkbox"/> Commercial <input type="checkbox"/> Multi-Family Residential <input type="checkbox"/> Residential: Single-Family Residential or Duplex <b>Occupancy Classification:</b> _____	
		New Construction/Addition		Alteration/Reconfiguration of Space	
Total Value: _____		Square Footage: _____			
		Value of Work: \$ _____		\$ _____	
Description of Work: _____					
Property Owner			Contractor		
Name: _____			Name: _____		
Address: _____ Suite: _____			Address: _____ Suite: _____		
City: _____ State: _____ Zip Code: _____			City: _____ State: _____ Zip Code: _____		
Driver's License/ State Identification Number: _____			State Identification Number/License: _____		
E-Mail Address: _____ Daytime phone: _____			E-Mail Address _____ Daytime phone: _____		
Architect			Structural Engineer		
Name: _____ License Number: _____			Name: _____ License Number: _____		
E-Mail Address: _____ Daytime phone: _____			E-Mail Address _____ Daytime phone: _____		
Notice & Certification					
<p>This application is hereby made to obtain a permit to do the work and installations as indicated. I certify that all work will be performed to meet the standards of all laws and construction regulations in this jurisdiction. I understand that a <b>separate permit</b> must be secured for <b>Electrical, Elevator, Fire, Mechanical, Plumbing, Signs, Wells, Pools, Furnaces, Boilers, Heaters, Tanks, Air Conditioners</b>, etc.</p> <p><b>Owner's Affidavit:</b> I certify that all the forgoing information is correct. Owner Certifies that the aforementioned Contractor has the authorization to perform the work as specified above.</p> <p><b>Lessee's Affidavit:</b> Lessee certifies that he has full consent and authorization from owner of subject property to perform the above-mentioned work and to hire above captioned contractor.</p> <p><b>In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as: the Environmental Division of Miami-Dade County; Permitting, Environment and Regulatory Affairs, Water &amp; Sewer Department, Department of Environmental Protection, South Florida Water Management District, Miami-Dade County Impact Fee, water management districts, state agencies, and/or federal agencies.</b></p> <p>Under penalties of perjury, I declare that to the best of my knowledge, the facts stated in this document are true. Any information found to be false may cause the revocation and/or denial of the permit and/or Certificate of Occupancy.</p>					
OWNER'S ELECTRONIC SUBMISSION STATEMENT: Under penalty of perjury, I declare that all the information contained in this permit application is true and correct.					
<input type="checkbox"/> <b>Owner/Lessee for new permits</b> (Documentation establishing ownership may be requested). <input type="checkbox"/> <b>TEMPORARY STRUCTURE PERMIT PACKAGE MUST BE SUBMITTED TWO (2) WEEKS IN ADVANCE.</b> <input type="checkbox"/> <b>Master Permit Contractor of Record</b> (For sub-permit / change of contractor).					
<b>WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT IS REQUIRED FOR ANY WORK WITH COST EXCEEDING \$2,500.00.</b>					
Signature of Owner/Agent or GC (for Sub-permits): _____  PRINT NAME: _____ STATE OF FLORIDA MIAMI-DADE COUNTY Sworn to and subscribed before me this _____ day of _____, 20____ by _____ Signature of Notary Public _____  Print Name: _____  (SEAL) Personally known _____  or Produced Identification _____			Signature of Qualifier: _____  PRINT NAME: _____ STATE OF FLORIDA MIAMI-DADE COUNTY Sworn to and subscribed before me this _____ day of _____, 20____ by _____ Signature of Notary Public _____  Print Name: _____  (SEAL) Personally known _____  or Produced Identification _____		

## Excellence Miami Beach

## Our Mission

We are committed to providing excellent public service and safety to all who live, work and play in our vibrant, tropical, historic community.

<b>Form Name</b>	Permit Application.
<b>Form Purpose</b>	This form is completed if an owner or developer would like to request a <b>permit</b> for a construction or a rehabilitation project within the City of Miami Beach.
<b>Related Forms</b>	Please see the Permit Application Submittal Checklist on the link below:  <b><u>Permit Application Submittal Checklist.</u></b>
<b>Associated Fees</b>	<ol style="list-style-type: none"> <li>1. <b><u>Upfront Processing Fee.</u></b></li> <li>2. Permit Fees, as applicable based on current <b><u>Fee Schedule.</u></b></li> </ol>
<b>Additional Info</b>	<p>Payments can be made at following locations and online:</p> <ul style="list-style-type: none"> <li>• <b>Kiosks/IPads</b> located at the Building Department, 2<sup>nd</sup> Floor of City Hall and at the North Beach Office, 962 Normandy Drive, Miami Beach, FL 33141.</li> <li>• <b>Cashier's windows</b>, 1<sup>st</sup> Floor of City Hall.</li> <li>• <b><u>Online Quick Pay</u></b></li> </ul>
<b>Form Process</b>	<ol style="list-style-type: none"> <li>1. Permit Application and project plans submitted with upfront fee paid.</li> <li>2. Plan Review Process is performed and approved by the City, if applicable.</li> <li>3. Payment of full permit fees are assessed and satisfied.</li> <li>4. Permit is issued.</li> </ol>
<b>For Progress Status</b>	<p>You can check on an application's status in the City via the CAP system:</p> <ul style="list-style-type: none"> <li>• <b><u>CAP SYSTEM</u></b></li> </ul>
<b>For Assistance</b>	<p>Please contact:</p> <ul style="list-style-type: none"> <li>• <b>In person:</b> Permit Counter at the Building Department's Main Office 1700 Convention Center Drive, 2<sup>nd</sup> Floor, Miami Beach, Florida 33139, or North Beach Office located at 962 Normandy Drive, Miami Beach, Florida 33141.</li> <li>• <b>Via Telephone:</b> 305-673-7610.</li> <li>• <b>Online:</b> <a href="http://www.miamibeachfl.gov/city-hall/building/">http://www.miamibeachfl.gov/city-hall/building/</a></li> </ul>

**TEMPORARY STRUCTURE PERMIT PACKAGE MUST BE SUBMITTED TWO (2) WEEKS IN ADVANCE.**

## ADA Information

To request this material in accessible format, sign language interpreters, information on access for persons with disabilities, and/or any accommodation to review any document or participate in any city-sponsored proceeding, please contact 305-604-2489 (voice), 305-673-7524 (fax), or 305-673-7218 (TTY) five (5) days in advance to initiate your request. TTY users may also call 711 (Florida Relay Service).